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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Yasuo SHIBUSAWA

Serial No: 09/871,585

Confirmation No.: 3478

Filed: May 30, 2001

For: Web Page Transmission System, Web Page
Transmission Method and Storage Medium

Art Unit: 2155

Examiner: Ismail, Shawki Saif

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:
Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450, on
December 28, 2004

Date of Deposit

Joyce Hegeman

Name

Signature

December 28, 2004

Date

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Transmitted in the application is the following items.

- ☒ Amendment
☒ Return postcard

The fee has been calculated as shown below:

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	29	-	29 **	0	LG=\$50 SM=\$25	\$ [FEE] \$ 0
INDEPENDENT CLAIMS FEE	9	-	9 ***	0	LG=\$200 SM=\$100	\$ [FEE] \$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180	\$ [FEE]
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)				\$250 FOR EACH ADDITIONAL 50 SHEETS		\$ [FEE]
TOTAL						\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$ 0 to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**
- ☐ A check in the amount of \$ 0 to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.

Date: December 28, 2004

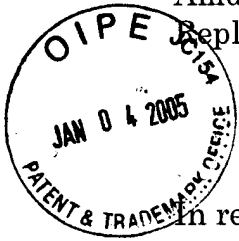
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Appl. No. 09/871,585
Amdt. Dated December 28, 2004
Reply to Office Action of September 28, 2004

Attorney Docket No. 81754.0062
Customer No.: 26021



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Yasuo SHIBUSAWA

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For: Web Page Transmission System, Web
Page Transmission Method and
Storage Medium

Art Unit: 21551

Examiner: Shawki S. Ismail

AMENDMENT

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated September 28, 2004, please amend this application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.

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Name

Signature Date December 28, 2004